

System of Care Committee
Meeting Minutes
Tuesday, January 24, 2006

Members Present: Mary Dalton, Pete Surdock, Mignon Waterman, Scott Boyles, Tim Kober, Jannis Conseleya, Shirley K. Brown, Bonnie Adey, Natalee Barnes, Tim Lambert, Jamie Smith, Janie McCall, Jim Fitzgerald, Anna Whiting Sorrell, Christie Hill-Larson, Dennis Cox, Jeff Folsom, Barb Hogg, Stephanie Luehr, Melanie Martin-Dent, Bob Runkle, Judge John Larson, Bill Snell, Lauren Graham, Dennis Bear Don't Walk.

Non-Members Present: Melanie Redman, Lowell Luke, Deb Sanchez, Dawn Smith, Jamie Stolte, Sharon Odden, Rita Pickering, Walt Wagenhals, Cyndi Erler, Karin Billings, Kari Tutwiler, Novelene Martin, Lorrie Biltoft.

Minutes passed as amended.

Agenda amended to add:

HRD:

There will be a public CHIP meeting on February 7 10-3 PM in Capital Building Room 303, Supreme Court Meeting Room. Public input is welcome.

The Health Resources Division is designing a wrap-around for Children's Mental Health and CHIP. The plan hopes to add:

- Extra days for in-patient
- Family therapy benefit for children
- Increase number of group therapy visits
- Offer respite.

Families will receive first services through BC/BS network. A child with SED will roll over into the new program.

CMHB - Pete Surdock Reported:

Introduction of new Children's Mental Health Bureau staff, Kari Tutwiler System of Care Social/Marketing Program Officer; Jamie Stolte, System of Care Program Analyst.

Update on Case Management meetings: There was a very positive response to the Region I tele-conference held last week. The next set of meetings is set for February 1, with 13 sites. The information is listed on the Children's Mental Health Bureau web site:

<http://www.dphhs.mt.gov/mentalhealth/children/index.shtml>. The meetings will collect information from parents, providers, i.e. what is working, what is not working, what is needed. Answers show very clearly that there is a strong need for training. No decision has been made about how the bureau will proceed with case management. After a decision is made there will be a statewide MetNet to share this information.

SED Waiver: Staff continues to work on the SED waiver as we wait for the federal agency to provide clarification as to whether or not RTC can be covered. This waiver would allow kids that are already Medicaid eligible to be able to obtain a different array of services in a community setting. When a concept paper is ready, Pete will ask for comment. There are only four of these waivers in the country.

Anna Whiting Sorrell requested information regarding what Medicaid is/does. Lorrie will provide each committee member with the most up-to-date version of the Medicaid-At-A-Glance pamphlets from CMS.

Update On EPP Requests: The bureau was asked to submit proposals addressing issues in Children's Mental Health. These requests have to be approved by the Department and the Governor's.

- System of Care: A bi-annual appropriation of \$900,000 (general fund). This would meet the hard match. This would help communities to meet their match for grants and sustain their projects beyond year three.
- A Crises Response Program. Parents need crises response services. The bureau is looking at two models:
 - Triage facility – A four to five bed facility based on a group home model, one in each administrative region. The facility would have a team associated with it so that a parent or guardian could admit a child for up to 2 weeks when in crises. The goals are to stabilize at lower level than a hospital, and return child back to family. Two primary focuses 1) stabilize youth, 2) comprehensive assessment.
 - Home based crises service – A team serves the child in his/her home when in crises. More intensive, six to eight week at a time service. Each team would serve a maximum of two to three families. Teams family focus in community can serve 260 families and set up 8 across regions.
- Additional funding for completion of rate adjustment. Targeted is campus and group home level.
- Restoring money for room and board for Therapeutic Group Care for families that don't have funds or insurance coverage.
- Placeholder concept around case management.
- Placeholder for potential issue with the feds about paying for Therapeutic Group Care and Foster Care.
- Add funding to utilization review. More intensive review is needed. Kids shorter stays, return home, less restrictive.

One of the things that will happen in Medicaid is a lowering of the federal match. If the match is moved by as little as 1%, this means \$7.5M in general fund monies. We have no control over this.

Community SOC - Karin Billings Reported:

- New round of implementation grants targeted for mid-March
- Two communities that have received implementation grants need support, training, Q/A, Karin has been visiting to assist.
- Work Groups will have new staff from bureau to help.
- Very successful Federal Site Review of the SOC grant in December. Preliminary response was received by e-mail on Friday. Will review and send to members, and will need volunteers from SOC Committee for formal response.
- Staff has been hired for all grant positions.

Evaluation - Jamie Stolte reported:

- Working on identifying a database that the community can use.
- Initial Evaluation Plan is on-line.
- Working on the data collection process for national evaluation.
- Would like SOC & KMA committees to attend evaluation piece. Suggested project sites (KMA) form their own local evaluation teams comprised of community members.
- Group will put together a training plan for evaluation.
- Work Group on SOC will decide how sub-committee will meet, make decisions and make recommendations.
- Will be looking at data collected by other groups, OPI, Juvenile Justice, etc. High cost children's study was done on first group of kids. Suggestion that this group meets with the committee and find out what information was collected.
- How to involve regional funded KMAs in this project.
- Also need to have a review for cultural effectiveness.
- **Social Marketing** - Kari Tutwiler reported: Kari will be working with focus groups and KMA groups to develop messages that work on combating the stigma of mental illness for children. Kari will work with groups to identify audiences and methods to get these messages across.

Regional Reports (Please refer to the handouts distributed at the meeting for more detailed information):

Novelene Martin, Region I:

KMA is structured slightly different from other state KMAs. The Executive Board with membership from CFS, JP, four parent members, PLUK, and Novelene and meets monthly via tele-med. Makes decision regarding grants, etc. There are separate community teams from the Executive Board, which meet monthly and provide input to the Executive Board. Referrals are submitted to KMAs for youth before they leave the community for placement, or are returned to the community. At the Case Management tele-conference parents discussed that KMAs have helped and are very beneficial.

Sharon Odden, Region II:

- Region covers three reservations. The Blackfeet tribe has asked for her help in developing a KMA. She is working with Rocky Boy through the Havre KMA.
- The Great Falls area KMAs will have a summit on Thursday to discuss history of mental health care, philosophy, etc. Summit will be closed with KMA meeting to discuss if they will apply for Implementation Grant.
- NICWA Conference in Portland beginning Thursday, Sharon will be attending along with several representatives from the tribes.

Challenges:

- Havre is off to a slow start implementing their grant.
- Oversight of case management.
- Have not been able to hire professional parent in Great Falls.

Walt Wagenhals, Region III:

- Have received check for Implementation Grant, able to finalize hiring of grant staff.
- Have hired youth coordinator.
- Identified Executive Board. First separate meeting of that board is Friday.
- Operation development on grant, will be putting together a logic model with strategy, outcomes, etc.
- Will be an evaluation tech position that will be split with admin support as a half time position.
- Starting as group to move into realm of assessment. Mental health conversation is becoming more pronounced as to how placement committee can work together. Can see the mindset that SOC is starting to introduce into communities.

Challenges:

- Responsibility as treatment professionals to look at viability of placement.
- Have started bringing kids in for periodic review.
- Review from institutional track.
- Trying to have school involvement and have them involved in KMA.

Dennis Bear Don't Walk, Crow Children's Mental Health Project:

- Office has been established.
- Position descriptions are done; he is working on getting positions filled.
- Budget is being worked on.
- Healing to Wellness community team is in place.

Rita Pickering, Region IV:

- Helena KMA is just beginning the process of staffing children.
- Region IV is interested in applying for next round of grants and is observing other communities.
- Part B TANF money will be issued differently in Region IV. KMAs and community teams will discuss which kids they wish to spend money on, in the hopes that this helps with keeping children from leaving home.

Cyndi Erler, Region V:

- All KMA's are hoping that SOC values can be maintained as the bureau considers changes in case management.

- In December Missoula had their first KMA in which the identified youth was in attendance. It was a difficult meeting and as a result, the January meeting will focus on policies, procedure and possible changes.
- Looking at a system of management or some sort of governance structure in Missoula. Sixteen people have signed the interagency agreement but a number no longer attend the KMA meetings. Need to establish formal governance especially as grant staff and expenses begin
- Lake County and Salish and Kootenai tribe will be providing testimony to the interim legislative committee on crisis response.
- Ravalli Co. has an exploration grant, are still considering if they want to develop a formal KMA. They are fulfilling requirements of their grant.

Challenge:

- All KMAs are hoping that SOC values can be maintained.
- Missoula hired Klarissa Jensen on January 6 for Project Director position.
- In December Missoula had first KMA youth staffing. Meeting focus will look at the referral process.
- Looking at a system of management or some sort of governance structure. Sixteen people have signed a declaration for a governance structure.
- Lake County/Salish-Kootenai tribe KMA will be providing testimony
- Ravalli County has an exploration grant. Looking at moving forward to forming a KMA. Fulfilling the requirements of grant.

Public Comment:

Dawn Smith: KMA in Region II. Had one parent apply for professional parent position. Because there were no other applications, this has been put on hold. There was a general consensus that parents need to be on team.

Work Group Reports:

Policy – Rita:

Updated MOU will redo draft. Rita will send draft with revisions to SOC meeting with information and date to get to directors, attorneys, etc. for final discussion of MOU at next SOC meeting.

Training - Kari:

Broad array of training topics, need to look to the larger group to identify training resources.

Evaluation - Jamie Smith/Jamie Stolte:

Work group would like someone from Juvenile Justice – Natalee Barnes volunteered.

Made a recommendation for communities to form a local evaluation team that would operate on local level for local communities. Decisions in next month:

- Consent forms, administrative policies
- Training manual used to train new staff helping with evaluations
- Putting together data base for national evaluation
- Putting together service inventory for communities to use
- Defining evaluation questions

KMA - Bonnie:

Recommendation for training ideas- KMA Strengths Summit

They are developing work plan, where to start? Believe this is critical to start with item #3, then items 6 and 7.

Ask that SOC stay with barriers language

Would like to know what role SOC committee can have in recommending legislation. The department will research the issue and respond at the next meeting.

It was previously discussed that there be an SOC representative from each of the funded KMAs. SOC was asked if they want to formally invite someone from Great Falls? The department will look at list of

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members and make recommendation as to who should be included. Also, need a process for replacing turnover on group list.

Format for today's meeting was productive and request that format be kept the same.

Next Meeting: Tuesday, April 25 – MACO Building 10:00 to 3:30